FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

IA ETHICS AND HIGH PROCESS (

2011 JAN 19 PM 12: 54

| COMMITTEE NAME (Must be same as on Statement of Orga | anization) | Johnson |
|--|---|---|
| Patrick Harney for Supering for: IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statistical original to the committee of the committee | | FORM DR-2 DISCLOSURE (Rev. 12/2009) REPORT |
| (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue | idate (7) School Board or Other Politic | a |
| CANDIDATE COMMITTEES ONLY: | | Logged In S(A) |
| Candidate Name | Political Party (if applicable) | Scanned S(v) |
| Office Sought | District (if Senate or House) | Computer Audited |
| Late reports are subject to possible civil and criminal penalties. Pur candidate's committee, and the chairperson, for any other type of committee. | rsuant to lowa Code sections 68B.32/ committee, is the individual responsible | A(7) and 68A.401(3), the candidate, for a e for filing timely and accurate reports. |
| SIGNATURE OF PERSON FILING REPORT | 319 351-1954 | mesons 14 2011 |
| SIGNATURE OF PERSON FILING REPORT | TELEPHONE | DATE SIGNED |
| I AM FILING A Samuary 2011 (report date) | REPORT FOR (1) ELECTION | |
| ☐CHECK IF AMENDMENT TO REPORT DATED | • | Local Committees, enter Date of Election |
| ☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed | | County & Local Committees, enter County in which Election is held |
| | | |
| STATEMENT OF CASH ON HAND | | |
| STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is file.) | tal of all funds held by the | s 847.12 |
| CASH ON HAND at the beginning of the reporting period. (To | tal of all funds held by the | s <u>847.12</u> |
| CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fill | otal of all funds held by the cash on hand at the end rst report filed.) | |
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| CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is fit ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule Schedule H: Total Sales of Campaign Property (Attachedule H: Total Sales of Campaign Property (Attachedule H: Applies to Candidates' Commission Schedule B: Expenditures total (Attach Schedule B) Schedule B: Expenditures total (Attach Schedule B) Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (if final repayments total Schedule D)***************************** | otal of all funds held by the cash on hand at the end rst report filed.) | \$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$\$ |

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

| Reset | |
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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE | |
|--------------------------|--------------------------|
| B (Rev. 07/03) | MONETARY EXPENDITURES |
| | CK THIS BOX IF |

| COMMITTE | E NAME (Must be | same as on Statement of Organization) | | · · · · · · · · · · · · · · · · · · · |
|--------------------------------|--|--|---|---------------------------------------|
| Patric | K Harne | | | |
| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
| <u>-</u> - | ID# ₁₀₄₆ CK# | Johnson County Democrats | related local parade expenses | \$ 55.00 |
| | ID# ₁₀₄₇ CK# | Johnson County Democrats | sponsorhip of Johnson County Democrats Barbque | 100.00 |
| | ID# CK# | | | |
| | | ···· | SUB-TOTAL TOTAL (if last page of this schedule) | \$ \$ 1,55.00 |
| | | | | |

| THIS | BOX | APPL | JES T | O | CANDIDA | ATES' | COMMIT | TEES | ONLY: | |
|------|-----|------|-------|---|---------|-------|--------|------|-------|--|
| | | | | | | | | | | |

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

| Page | 1 . | of / |
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| OR INSTRUCTION | IS, SEE BACK OF FORM | | RESET | SCHEDULE | |
|------------------------------|--|-----------|--|-----------------------|----------------------|
| OMMITTEE NAME | E(Must be same as on Statement of Organization) | <u> </u> | | F | LOANS |
| | Harney for Supervisor | | | (Rev. 02/08) | RECEIVED & REPAID |
| | le reports money loaned to the committee which is deposited in the c | ommittee | account. | | THIS BOX IF |
| | ANS FROM LAST REPORTING PERIOD \$ 800000 | | | AMENDIN | IG FORM |
| ARTI- MONETAI | RY LOANS RECEIVED <u>THIS</u> REPORTING PERIOD | | | | · · · |
| (Original s | ource of loan, such as a bank, must be shown if a third party is involv | ed. Inclu | ide loans from candid | late's personal f | unds.) |
| DATE | NAME AND ADDRESS OF LENDER | D: | LATIONSHIP TO | AMOUNT O | ELCAN |
| RECEIVED (MM/DD/YR) | (Include Endorser's Name, if Applicable) | | IDATE (If Applicable* | AMOUNTO | F LOAN |
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| | | TOTAL | (PART I) | \$ | |
| PART II - MONETA Loans fo | ARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD regiven must be reported on Schedule E In-kind Contributions.) | | | | |
| | , and the second | | | | |
| DATE PAID (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | | LATIONSHIP TO DATE* (If Applicable) | AMOUNT R | REPAID |
| | | | - " | \$ | |
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| | TOTAL CASH REP | | • | \$ | |
| | From Schedule E - TOTAL L | | | \$ \$ 8000.0 | |
| *Disclosure law rea | TOTAL OUTSTANDING LOANS END (quires candidate committees to disclose the relationship of any relativ | | RT PERIOD | \$ 8000.0 | |
| making a contributi | ion to the committee. Relationship must be shown to the third degree of relatives) and affinity (relatives by marriage). If surname of contrib | of | _ | , | , |
| the same as candid | date, but there is no familial relationship, enter "not applicable" in the | uiti is | Page | / of (for Schedule | e F) |
| relationship column | | | | | |